

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097618

Entity Name: EAGLE COVE OF BREVARD, L.L.C.

FILED
Feb 22, 2007
Secretary of State

Current Principal Place of Business:

1730 BASIN STREET
MERRITT ISLAND, FL 32953

New Principal Place of Business:

1581 ROBERT J CONLAN STE 105
PALM BAY, FL 32905

Current Mailing Address:

1730 BASIN STREET
MERRITT ISLAND, FL 32953

New Mailing Address:

1581 ROBERT J CONLAN STE 105
PALM BAY, FL 32905

FEI Number: 20-3648709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHTER, R DALE
1730 BASIN STREET
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

SCOTT, DOUG
1046 HARPER BLVD
PALM BAY, FL 32908 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DOUG SCOTT

02/22/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: RICHTER, R D PRES
Address: 1730 BASIN STREET
City-St-Zip: MERRITT ISLAND, FL 32953

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ADVANCED CUSTOM CARP, ENTRY INC
Address: 1581 ROBERT J CONLAN STE 105
City-St-Zip: PALM BAY, FL 32905

Title: MGRM () Change (X) Addition
Name: SUZI, LLC,
Address: 1730 BASIN ST
City-St-Zip: MERRIT ISLAND, FL 32953

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DOUG SCOTT

MGRM

02/22/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date